

Grantee Name	Health Resources LifeCare Center
Location/Address	126 E. Lincoln Ave Fergus Falls MN 56537
Date and Location of Site Visit	126 E. Lincoln Ave Fergus Falls MN 56537 October 27, 2016
Grantee Participants	Erin Tysver, Director Sue Ronnevik, Director DL
MDH Participant(s)	Mary Ottman, Grant Manager
Grant Agreement #/PO #	109506

PURPOSE:

In accordance with the MDH Policy 238.01 Grantee Monitoring, MDH will conduct at least one monitoring visit per grant period on all state grants of over \$50,000, and at least annual monitoring visits on grants of over \$250,000.

The purpose of the grant monitoring visit is to review and ensure progress against the grants' goals, to address any problems or issues before the end of the grant period and to build rapport between the state agency and the grantees. This visit may cover topics such as statutory compliance; challenges faced by the grantee, modifications made to the grant program, program outcomes, grantee policies and procedures, grantee governance, and training and technical assistance needs.

The findings or information obtained through this monitoring activity will be used:

- To ascertain how MDH program funds are being utilized
- To provide targeted technical assistance needs
- To improve program implementation performance
- To suggest other training needs
- In future funding decisions

OVERVIEW

Is the Grantee's non-profit 501(c) 3 status current?

YES



- 2. Does the Grantee have a central file containing the official records for this grant agreement and/or amendment? YES
- 3. Where is this central file located? In the Office of the Grant Manager in a locked file cabinet. Also online in a Folder
- 4. Who is responsible for this central file? The Grant Manager, Director
- 5. Does the central file include
 - The grant proposal? Yes
 - The award letter? Yes
 - The signed grant agreement and any/all amendments? Yes
 - Any/all requests and/or approvals for scope/budget changes? Yes/NA
 - The work plan? YES
 - Any/all payment requests (invoices)? YES
 - Any/all signed subcontracts? Not applicable (no subcontracts) NA
 - Any/all Progress Reports? YES

REPORTING REQUIREMENTS

- Does the organization meet all reporting requirements as outlined in the grant agreement and/or amendment? YES
- 2. Are expenditure reports submitted timely and accurately? YES
- 3. Are progress reports submitted with all required information and in a timely manner? YES

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CONTRACTUAL

- 1. Does the Grantee have written policies or procedures addressing use of contractors and/or subcontractors? N/A
 - 2. Were any sub-contractors paid from the MDH grant required to sign a contractual agreement outlining services to be rendered, duration of engagement, and pay rate?
 - 3. Was the contractual agreement(s) reviewed and approved by MDH before implementation?

PERSONNEL POLICIES, PROCEDURES AND PRACTICES OF THE GRANTEE

- 1. Are time distribution records (e.g., time-sheets) maintained to show how employees who are funded through, or contributed in kind to, the MDH grant and who work on multiple projects/programs spend their time? Yes
- 2. Do personnel and/or payroll records show dates of hire/termination, immigration status if applicable, actual hours of time worked, leave time, federal and state programs worked on, and earning for all employees who are funded through, or contributed in kind, to the MDH grant? Yes
- 3. Does the Grantee have policies and procedures in writing regarding:
 - Payroll? YES
 - Travel? YES
 - Overtime? YES
 - Timesheets? YES
 - Taxes? YES
 - Purchasing? YES
 - Compensated time off? YES
 - •
- 4. Are employees time sheets approved? YES

By whom (what position)? The Director - By the Executive Director? YES



5. Does the Grantee's payroll preparation and distribution involve more than one employee? Yes	
6. Does an authorized official approve all checks before being signed? Yes	

Additional Comments:

Health Resources has been a long time PA grantee and has organized their administrative tasks with the recommended best practices for nonprofits.

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PROGRAMMATIC QUESTIONS

Please use this space to answer all questions.

Program History

- When was your program started? Why was it started?
 Health Resources started with pregnancy testing in 1983. In 2005 STI testing and the Education program was started. It was started to meet a need in the community of Fergus Falls where pregnant women could go to get resources, referrals and support services for them and their child.
- What need does your program fulfill?

 HRC meets the needs of our community as we are the only FREE location with an
 extensive Education Program in a one on one format that provides Education tailored to
 the unique needs of the mom. We also offer a wealth of resources, referrals and material
 goods that help support the pregnant mom and baby.
- How has the program grown or changed since its beginning? The program has changed extensively since the beginning. Medical services have grown from only providing pregnancy testing to Ultrasound services in the first trimester, STI testing and treatment, FREE prenatal vitamins, a broad range of topics the mom can choose to study from Pregnancy to Toddler topics, Registered Nurses from which to receive medical services and education, a large store from which the client can receive material needs for themselves and their baby. The addition of Women's Health Screening and Fertility Care started in 2013. Life Coaching certification has been completed by two staff members in 2016. A full range of Life Coaching topics are now available. We also now have a second location in Detroit Lakes MN.
 Health Resources is also in the initial stages of offering Life Coaching and mentoring for

Grantee's Target population

their clients.

- Who does the organization primarily serve?

 The organization primarily services single women in their early 20s. Our demographic ranges however from ages 14-40+, both male and female clients.
- What is the program's demographic and geographic coverage?
 We serve clients from 5 surrounding counties and 9 cities. Our demographic ranges from ages 14-40.
- Review recent Demographic reporting. Recent Demographic reporting has demonstrated

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a steady reporting of client activity as discussed at the meeting.

Leadership and Governance

- Effective Board: How many board members currently serve, who are they?
 7 members of the Board; Eric Rasmussen, Youth Pastor; Rich Iverson, Pastor; Christine Uggerud, Stay at home mom; LaWayne Rogness, Financial Officer for LBC; Matthew Olsen, Lawyer for OtterTail Power; Becky Rogness, Public Relations
- How often do they meet? How are they informed of organization's progress and challenges?
 - The Board meets every other month. They are informed regularly through email communications, face to face communication with Chairman and Director and Director Reports given at Board meetings.
- How supportive is the Board of the program?
 Very supportive and very involved.
- How is the program staffed? Who is responsible for the supervision of grant staff? The program is staffed with Registered Nurses, Educators and Life Coaches. The Director is responsible for the supervision of Grant Staff.
 - How are staff evaluated on their performance? How long have PA staff been employed there?
 - The staff are formally evaluated on a semi-annual basis. Nurse Educator/Ultrasound Nurse: 6 years, Nurse Manager: 1 year; Director 1 year (served as Director from 2006-2013); Grant Manager/FCP, 4 years, Educator/Life Coach, 4 years; Business Manager, 1 year; Office Manager, 1 year; DL Director/Life Coach, 8 years; DL Nurses, 1 year.
 - How are staff background checks done?
 Background checks are completed upon hire through the MN BGCA
 - What is your organization's policy on complaints for staff and clients?
 Policy is that complaints are directly brought to the attention of the Director. If the complaint is about the Director than the Nurse Manager, then steps in to deal with complaint.

Budget

- Does the current budget reflect your work plan activities?

 YES
- Is the budget accurate for the project size/scope?

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YES

- Do you have any challenges with the budget or invoicing?
 NO
- Has your Financial Reconciliation taken place?
 NO
- If you have an elevated risk designation, and/ or your Financial Reconciliation report cited any concerns, these will be discussed.

Health Resources has a medium risk as demonstrated by their responses made on their Due Diligence form in their original application.

Review Work Plan including:

Partners

- o If applicable: how are people referred to the program? Are there any barriers encountered with referral sources? What is your most common referral source? We partner with other local agencies such as the local clinic, school and WIC. We provide information at the prenatal appointments as well as the take home bags after baby is born. We also partner with MAHUBE OTWA, Nurse Family Partnership, United Way, Salvation Army, Someplace Safe, and the Workforce Center. Our information is provided to them to give to their respective clients. Our most common referral sources are the Local Hospital or by internet search.
- Challenges with partners or specific counties?
 None

Work Plan

- Review your 2016 19 grant application's description of the program you are asking to be funded. On your work plan note the services and activities you said you would provide and the number of clients you would serve.
- Prepare a short summary of your current program(s) and the number of clients being served.

In an effort to promote healthy positive pregnancy outcomes, we continue to provide pregnancy testing, first trimester ultrasound and prenatal vitamins. In addition to those medical services we provide education services as well focusing on healthy pregnancy and parenting education. Specific examples of education lessons include "Shaken Baby", "Sleep Safety", "Car Seat Safety", "Benefits of Breastfeeding". We also have education on Developmental Milestones. Our client

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numbers currently are on track to meet program goals. We additional provide Fertility Care and Women's Health Exams.

- O How does what you describe in the application compare with what you are currently providing? Our application and services provided align. Have any programs and/or activities or services been added or removed? No. Have the number of clients being served per quarter decreased or increased since June 2016? Our quarterly numbers appear to be on track with our stated goals. Is there anything in particular you want to share about your current program to explain its current status?
- Do you anticipate making any changes to the 2017-18 Work Plan? If so, in what way and for what reasons? None anticipated. We will continue to implement Life Coaching as our newest program.

Participants:

- What type of outreach does the organization put into action? The education staff
 work with the nurses to make quarterly contact with outside agencies. The staff
 also have specific follow up protocols in place to make systematic and consistent
 contact with clients.
- What is working well? We have found that texting works really well to contact clients. For example, contacting clients through a phone call often goes unanswered. Texting however has shown a high rate of response.
- What are more the challenging aspects to finding or retaining clients? Clients often come to meet a material need at first. Sometimes, these clients after this need is met do not see a "need" for education or return visits. Often after clients have their baby, their schedule is such that they are unable to make routine visits to HRC.

Data:

- How is program data collected and by whom? New intakes are inputted by the
 Office Manager. Each educator after a client visit, adds visit information and follow up notes.
- o Is data collected useful to agency? Yes
- Anything we can do to help or simplify data collection? No

Review Evaluation

• Your 2015-16 Evaluation Report Summary will be discussed (If you were a past grantee).

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• Your 2016-17 Evaluation Plan will be reviewed. Any suggestions provided in your 2015-16 Report Summary should be included in the plan, if you are continuing a similar evaluation. If you are planning a new evaluation, details will be discussed. Do you have any questions on your evaluation? Year 1 evaluation was a closer look at the center's safe sleep program. A review of the final report was sent out in early October. Year 2 evaluation will be on the use and effectiveness of their prenatal packets along with the evaluation of prenatal connections and the realization by clients of potential healthy pregnancy outcomes. The Year 2 evaluation plan has been approved.

Miscellaneous

- Anything else you would like to share?
- Anything else we haven't asked?

What can we do to help?

- Trainings and Grantee meetings useful for grantee? Yes. Any topic suggestions? It would
 be nice to have a Grantee meeting dedicated SOLELY to the Grant and its various aspects.
 This would help beginners have a holistic view of the Grant as well as allow for time to get
 into the 'nitty gritty' details.
- Feedback or suggestions for the state?
- Is there any way MDH can assist you to better equip your success in the Positive Alternatives Grant Program?

Summary:

Health Resources Life Care Center (HRLCC) has been a long time grantee beginning with the 2008 – 2012 Positive Alternative (PA) grant cycle. The PA grant has helped the organization to greatly expand programming since their beginning in 1983 when only offering pregnancy tests. Currently the center through their PA funding offers the following programming: outreach, car seat education and distribution, crib safety education and distribution, interpreter services, life coaching, material support, nutrition support, pregnancy and parenting education, transportation assistance and ultrasound services.

In the past several years HRLCC has expanded their services one-hour north of their current offices to include the rural area of Detroit Lakes. They are currently offering services in Detroit Lakes several times per week with staff permanently assigned to this satellite office. Both offices in Fergus Falls and Detroit Lakes offer critical services to a large rural population covering several

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counties from the programming provided by HRLCC.

Staffing changes have been made recently at HRLCC with the addition of a new Executive Director (ED). With previous experience at the center, the staff transition appears to be going well. Along with the staff changes, the board of directors is discussing the possibility of initiating strategic planning with the help of an outside consultant. In the beginning stages of discussion, staff are excited to take a deeper look at the future direction of the center and its programming with their board of directors.

Staff are exploring the possibility of changing their use of a data system collection to the new Heart Beat International data system called *Next Level*. This new system is in the launch stage and HRLCC is interested in this program specifically as it has advanced features for appointment setting for clients and for contacting clients to have appointments kept. HRLCC will keep MDH updated on their success with this new data program.

With the new ED hired, staffing descriptions and positions will be reviewed and discussed. Changes in staffing hours and possible descriptions are being considered in keeping with the PA budget. Salaries will also be looked at. HRLCC staff will be reviewing all positions looking to provide the best possible services for the funding provided. Any changes will be submitted to the grant manager for approval.

HRLCC has been a responsible grantee with providing critical services to rural areas that would otherwise not have support for women in unplanned and crisis pregnancy situations. Changes in staffing and all transitioning appears to be going seamlessly. HRLCC continues to work to meet the needs of their community with programs and referrals to local community services that staff have made efforts to have excellent relationships with. It has been a pleasure to work alongside HRLCC to serve the rural communities of West Central Minnesota. I look forward to working with HRLCC in the remainder of the grant cycle.

Date: October 26, 2017 Grant Manager: Mary Ottman

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